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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)					
Erik Paulsen					
(b) Address (number and street) P.O. Box 44369 250 Prairie Center Drive	☐ Check if address changed		Candidate's FEC Identification Number     H8MN03077		
(c) City, State, and ZIP Code				Amended	
Eden Prairie	MN	55344	Statement (N) OR	(A)	
4. Party Affiliation	5. Office Sought	6. State & Distr	ict of Candidate		
REPUBLICAN PARTY	House	MN	03		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)					
NOTE: This designation should be f	iled with the appropriate office lis	sted in the instructions.			
(a) Name of Committee (in full)					
Friends of Erik Paul	sen				
(b) Address (number and street)					
P.O. Box 44369					
250 Prairie Center Drive					
(c) City, State, and ZIP Code					
Eden Prairie		MN	55344		
	0101147101107		001414		
DE	SIGNATION OF OTHE	R AUTHORIZED ( ndraising Representative			
	(including John Lu	nuraising Representative	(5)		
8. I hereby authorize the following namcandidacy.	ned committee, which is NOT my	principal campaign com	mittee, to receive and expend funds on beh	alf of my	
NOTE: This designation should be filed with the principal campaign committee.					
(a) Name of Committee (in full)					
2015 SXSW GOP C	Committee				
2010 07.011 001 0					
(b) Address (number and street)	04				
2470 Daniels Bridge Rd Ste. 1	۷۱				
(c) City, State, and ZIP Code					
		GA	30606		
Athens		GA	30606		
Legatify that I have eva	mined this Statement and to the	hest of my knowledge a	nd belief it is true, correct and complete.		
	Timiod tilio Otateriiciit and to tile	boot of my knowledge at			
Signature of Candidate			Date		
Reid Lebeau		[Electronically Filed]	02/06/2015		
		. , ,			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.					
<b>NOTE:</b> Submission of false, erroneous,	or incomplete information may s	subject the person signing	g this Statement to penalties of 2 U.S.C. §43	37g.	
NOTE: Submission of false, erroneous,	or incomplete information may s	subject the person signing	g this Statement to penalties of 2 U.S.C. §43	7g.	
NOTE: Submission of false, erroneous,	or incomplete information may s	subject the person signing	g this Statement to penalties of 2 U.S.C. §43	7g.	
NOTE: Submission of false, erroneous,	or incomplete information may s	subject the person signin	g this Statement to penalties of 2 U.S.C. §43	7g.	

FEC FORM 2 (REV. 02/2009)

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)	Page 2 / 2
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds candidacy.	s on behalf of my
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
Pioneer Project	
(b) Address (number and street) 2470 Daniels Bridge Rd Ste. 121	
(c) City, State and ZIP Code	
Athens GA 30606	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend fund	[ ADDITIONAL ] s on behalf of my
candidacy.	
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
(b) Address (number and street)	
(c) City, State and ZIP Code	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend fund candidacy.	s on behalf of my
NOTE: This designation should be filed with the principal campaign committee.	